to a myriad of communities through his lifetime. And we all join in wishing him a very happy birthday.

CALL FOR RECOGNITION OF AND ACTION ON THE HUMANITARIAN CRISIS OF AIDS

HON. CHARLES B. RANGEL

OF NEW YORK

IN THE HOUSE OF REPRESENTATIVES Tuesday, July 24, 2001

Mr. RANGEL. Mr. Speaker, I rise before you today to call attention to the worldwide humanitarian crisis of AIDS. As we consider appropriations for fiscal year 2002, I urge my colleagues to increase our focus on the fight against HIV and AIDS.

I support and applaud the substantial increase in funding to fight HIV/AIDS around the world. I am happy to see that Foreign Operations Appropriations Act for Fiscal Year 2002 includes \$474 million for combating HIV/AIDS, roughly \$45 million more than the Bush administration requested. The bill provides for \$100 million of the promised \$200 million U.S. contribution to the new United Nations Global Fund to fight HIV/AIDS, Malaria, and Tuberculosis. I hope that this contribution is the first of many, a down payment on our global future.

As I consider the recent U.N. AIDS conference, I think about the world's people rallying together, in all of our richness and complexity, to fight something so basic yet elusive: a virus. It is shocking and difficult to absorb the reality of the expansive damage done by an organism so small.

It was 20 years ago that we began this fight, and it is a difficult anniversary. Thankfully, past disagreement on this issue has given way to building consensus that AIDS is an international emergency that threatens global security and stability. For the United States, this is a matter of the highest urgency and national interest. The moral, humanitarian, economic, and international security threats posed by AIDS mandate concentrated and immediate action.

We are all aware of the health crisis presented by AIDS. The facts are staggering and quoted often. At times, the numbers are so emotionally unwieldy that it is difficult to absorb the reality of this epic loss in a meaningful way.

Again, we survey the damage: 21 million people have lost their lives to AIDS. Of those, 17 million victims were Africans. This loss of human life is unparalleled. Sub-Saharan Africa is home to about 10 percent of the world's population—and more than 70 percent of the worldwide total of infected people. The United Nations reports that 25.3 million adults and children in sub-Saharan Africa are currently infected with the HIV virus and that 12.1 million African children have been orphaned by AIDS since the epidemic began 20 years ago. These children are left to a life of malnutrition and limited educational opportunity.

Beyond Africa, the impact of AIDS is increasing in Asia, Central America, Eastern Europe, and India. The situation is also dire closer to home. The Caribbean is fast

The world's poorest countries are those hardest hit. As the virus destroys the lives and bodies of individuals, it east away at the very fabric of developing nation-states. Tragic and personal experiences with death in these countries are adding up to disastrous social and economic trends.

UNAIDS states that 95 percent of the world's 34.3 million HIV-infected people live in developing countries, countries where access to care and much-needed medicines are limited. Development is reversed and already-fragile governments are strained. Developing economies are further marginalized by as much as 20 percent. As nations lose entire generations, they lose skilled workers, teachers, doctors, and leaders. The virus is depriving Africa of those who could best contribute to its future, leaving behind economic decline and political upheaval.

African and other third-world nations, long on the back burner of U.S. policy consideration, now demand our attention and cooperation. This continuum of suffering must be met with a continuum of real and immediate intervention. This epidemic is truly the greatest developmental challenge of our lifetime.

The situation is dire, yet is my hope that in the midst of this crisis, we can find great opportunity. Perhaps we can meet this challenge, employing crisis as a tool to improve medical training, treatment, and health care delivery infrastructure for the world's neediest people.

We must meet the urgency of this great calamity and move from shocking figures to strategic, collaborative interventions. The United States must use both our resources and our moral influence as we urge all nations to join in this fight.

We must augment our own contributions and urge increased international donations to the World Bank AIDS international trust and the U.N. Global Fund to Fight HIV/AIDS, Malaria, and Tuberculosis. The President recently requested roughly \$2.5 billion for Theater Missile Defense (TMD). Surely, we can do more for AIDS.

Strategic, multilateral partnerships must be formed between governments, non-governmental organizations, pharmaceutical companies, and private foundations and industry to further a comprehensive program of worldwide HIV/AIDS prevention, awareness, education, and treatment. We must focus on authorizing critical assistance to fight the disease in sub-Saharan Africa and other developing countries.

I wish to stress that we must not lose hope as we face tough decisions and the difficult balancing of different positions and approaches. We must allocate rationed resources and discuss the appropriate balance between prevention, treatment, and research. We must craft a compromise between important international trade rules and critical access to HIV-related drugs. We must temper the urgent need for the availability of antiretroviral drugs with the reality of health systems that are not prepared for diagnosis and treatment. As we work to extend the lives of people living with AIDS, we must pursue aggressive and phased-in interventions. Without focused funding on the improvement of medical infrastructure, we entertain dangerous public health risks posed by the introduction of drug-resistant strains. We must anticipate and constructively respond to all these challenges as they arise, for they will arise. But let it be said: challenges and hurdles are never a reason to not attempt change, especially when the goal is reduction of extreme human suffering and prolonging of life. We must frame setbacks as opportunities for improved efforts.

Lastly, I urge my colleagues to consider the effects of trade and debt reduction policies that influence the treatment of the disease. We must push for the full implementation of the African trade bill and Caribbean Basin initiative. Additionally, it is essential that we provide debt relief to the world's poorest countries and enable these countries to reinvest the savings in treatment, prevention, education, and poverty reduction efforts.

I urge my colleagues to let these appropriations be another step in U.S. leadership on this issue. Our own citizens have led the fight in awareness and advocacy on this issue—let us meet them in their determination and dedication. Let these funds be the beginning of increased efforts to treat and prevent this terrible disease. If we miss this opportunity for leadership, we will lose an entire generation. We cannot come late in our response.

I thank my colleagues for their continued cooperation and action on this issue. It is my wish that our efforts will result in a day where much like smallpox, the worldwide plague of AIDS will be only a memory; poignant, yet firmly in our past.

PAYING TRIBUTE TO THE TRW CHASSIS SYSTEMS' FENTON PLANT

HON. MIKE ROGERS

OF MICHIGAN

IN THE HOUSE OF REPRESENTATIVES

Tuesday, July 24, 2001

Mr. ROGERS of Michigan. Mr. Speaker, I rise today to pay tribute to the TRW Chassis Systems' Fenton Plant for receiving the prestigious Michigan Voluntary Protection Programs (MVPP) Star Award for workplace safety and health excellence. They were presented with the award by the Michigan Department of Consumer & Industry Services on June 15, 2001 during a ceremony at the plant.

In receiving this award, the plant was subject to intense competition and a verification audit with stringent criteria that emphasizes management commitment, employee involvement and low accident rates. The Fenton plant's accident rates and lost work day rates are far below the Michigan average for the industry.

Therefore Mr. Speaker, I respectfully ask my colleagues to join me in paying tribute to the TRW Chassis Systems' Fenton Plant for receiving the Michigan Voluntary Protection Programs Star Award.